

FILED Aug. 11, 2008

U.S. District Court  
Northern District of California  
450 Golden Gate Ave.  
San Francisco, CA. 94102

WHA

CASE NUMBER: CV 083444

Nathan Seastrunk  
V-81987, 6-218  
Solano State Prison  
P.O. Box 4000  
Vacaville, CA. 95696

RE: REQUEST FOR ADDITIONAL TIME

On the 22nd of July I received notice from this Court informing me that I had until Aug. 17 to submit an Informal Petition with a certified copy of my trust account.

On July 24 I submitted a request and the informal petition to the supervisor of the trust office with a copy of the court deadline, and on Aug. 4, I filed an inmate's grievance concerning this matter. (SEE ATTACHED).

PLEASE grant petitioner additional time to receive the certified copy trust account.

Thank you for your time and consideration in this matter.

Nathan Seastrunk

Respectfully Submitted

STATE OF CALIFORNIA

DEPARTMENT OF CORRECTIONS

**INMATE/PAROLEE  
APPEAL FORM**  
 CDC 802 (12/87)

Location: Institution/Parole Region

Log No.

Category

1. \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

2. \_\_\_\_\_

You may appeal any policy, action or decision which has a significant adverse affect upon you. With the exception of Serious CDC 115s, classification committee actions, and classification and staff representative decisions, you must first informally seek relief through discussion with the appropriate staff member, who will sign your form and state what action was taken. If you are not then satisfied, you may send your appeal with all the supporting documents and not more than one additional page of comments to the Appeals Coordinator within 15 days of the action taken. No reprisals will be taken for using the appeals procedure responsibly.

NAME	NUMBER	ASSIGNMENT	UNIT/ROOM NUMBER
SEASTRUNK, N.	V-81987	BUTCHER'S SHOP	6-218

A. Describe Problem: ON OR ABOUT THE 2ND. WEEK OF JUNE I SUBMITTED A REQUEST TO THE TRUST OFFICE REQUESTING A CERTIFY COPY OF MY TRUST ACCOUNT WHICH IS REQUIRED BY THE U. S. DISTRICT COURT TO FILE A WRIT OF HABEAS CORPUS. JULY 24, I SUBMITTED ANOTHER REQUEST TO THE SUPERVISOR OF THE TRUST ACCOUNT DEPARTMENT WITH THE INFORMATION THAT THE COURT HAD RECENTLY ADVISE ME THAT I HAD UNTIL AUG. 17 TO SUBMIT AN INFORMAL PARDON WITH A CERTIFY COPY OF MY TRUST ACCOUNT ARE MY PETITION WILL BE DISMISSED. AS OF THIS DATE I HAVE NOT RECEIVE

If you need more space, attach one additional sheet. A COPY OF MY TRUST ACCOUNT.

B. Action Requested: PLEASE FORWARD ME A CERTIFIED COPY OF MY TRUST ACCOUNT FOR THE PAST SIX MONTHS. CASE NO. C/083444

Inmate/Parolee Signature: \_\_\_\_\_

Nathan SeastrunkDate Submitted: 8-4-08

C. INFORMAL LEVEL (Date Received: \_\_\_\_\_)

Staff Response: \_\_\_\_\_

Staff Signature: \_\_\_\_\_

Date Returned to Inmate: \_\_\_\_\_

**D. FORMAL LEVEL**

If you are dissatisfied, explain below, attach supporting documents (Completed CDC 115, Investigator's Report, Classification chrono, CDC 128, etc.) and submit to the Institution/Parole Region Appeals Coordinator for processing within 15 days of receipt of response.

Signature: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Note: Property/Funds appeals must be accompanied by a completed Board of Control form BC-1E, Inmate Claim

CDC Appeal Number: \_\_\_\_\_



Short Title:

Seastrunk v. Sisto

Court Case No:

08-3444Proof of Service By MailI am over the age of 18 and a party/~~not a party~~ (mark one out) to the cause.

I am a resident of or employed in the county where the mailing occurred. My

residence or business address is (specify): SOLANO STATE PRISON (I.D. #V-81987)  
P.O. BOX 4000  
VACAVILLE, CA. 95696

I served the attached:

REQUEST FOR ADDITIONAL TIME

By enclosing true copies in a sealed envelope addressed to each person

whose name and address is given below and depositing the envelopes in the

United States mail with the postage fully prepaid. in the County of VACAVILLEDate of deposit: AUG. 11, 2008

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

U.S. District Court for the Northern Dist.  
OF CALIFORNIA. 450 GOLDEN GATE AVE.  
SAN FRANCISCO, CA. 94102

I certify under penalty of perjury that the foregoing is true and correct.

DATE: AUG. 11, 2008Nathan Seastrunk

(TYPE OR PRINT NAME)

Nathan Seastrunk

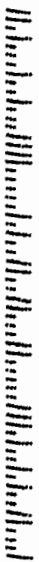
(SIGNATURE OF DECLARANT)

Nathan Seastrunk CDC# V-81987  
CSP- Solano, 6-2184p  
P.O. Box-4000  
Vacaville, CA. 95696-4000

California State Prison - Solano

LEGAL MAIL

3410233661 0004



To: U.S. District Courts

Northern District of California  
450 Golden Gate Ave.  
San Francisco, CA. 94102



1  
J. Edgar Hoover  
10/8/08